

HAWAII STATE ETHICS COMMISSION  
1001 BISHOP STREET, PACIFIC TOWER 970  
P.O. BOX 616, HONOLULU, HAWAII 96809  
TEL.: 587-0460 FAX: 587-0470

RECEIVED

03 JAN -9 10:10

## LOBBYIST REGISTRATION FORM

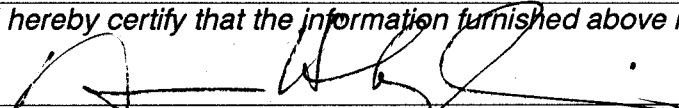
(See back of this form for instructions)

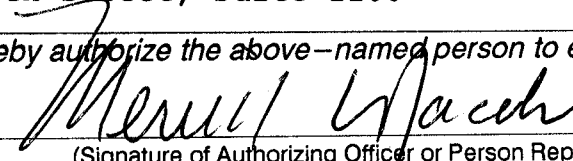
(Type or Print Clearly) STATE ETHICS COMMISSION

<b>PART I LOBBYIST</b>			
NAME(Last) SUZUKI	(First) NORMAN	(Middle) H.	TELEPHONE 808-521-2661
MAILING ADDRESS (Street) 1188 Bishop Street, Suite 1805	(City) Honolulu	(State) HI	(Zip Code) 96813
EMPLOYING ORGANIZATION (Fill in only if you are employed by a business entity which has been retained to lobby) Suzuki & Goo, Attorneys, A Law Corporation			TELEPHONE 808-521-2661
MAILING ADDRESS (Street) 1188 Bishop Street, Suite 1805	(City) Honolulu	(State) HI	(Zip Code) 96813

<b>PART II ORGANIZATION</b>			
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate) Pharmaceutical Research and Manufacturers of America			TELEPHONE 202-835-3523
MAILING ADDRESS (Street) 1100 Fifteenth Street, NW	(City) Washington, DC	(State)	(Zip Code) 20005
NAME OF PERSON RESPONSIBLE FOR PREPARING ORGANIZATION'S EXPENDITURES STATEMENT Merrill R. Jacobs			TELEPHONE 916-498-3304
MAILING ADDRESS (Street) 980 9th Street, Suite 2200	(City) Sacramento	(State) CA	(Zip Code) 95814

<b>PART III DESCRIPTION OF SUBJECTS UPON WHICH YOU EXPECT TO LOBBY</b>			
<input type="checkbox"/> Agriculture	<input type="checkbox"/> Education	<input type="checkbox"/> Human Services	<input type="checkbox"/> Science, Technology & Economic Development
<input type="checkbox"/> Communications & Public Utilities	<input type="checkbox"/> Government Operations & Finance	<input type="checkbox"/> Intergovernmental Relations, International Affairs	<input type="checkbox"/> Tourism & Recreation
<input type="checkbox"/> Consumer Protection & Commerce	<input type="checkbox"/> Hawaiian Affairs	<input type="checkbox"/> Labor & Employment	<input type="checkbox"/> Transportation
<input type="checkbox"/> Culture, Arts, Historic Preservation	<input type="checkbox"/> Health	<input type="checkbox"/> Planning, Land & Water Use Management	<input checked="" type="checkbox"/> Other: (indicate below) <u>Pharmaceuticals &amp; related issues</u>
<input type="checkbox"/> Ecology, Energy, Environmental Protection	<input type="checkbox"/> Housing	<input type="checkbox"/> Public Safety & Corrections	

<b>PART IV CERTIFICATION OF LOBBYIST</b>	
I hereby certify that the information furnished above is, to the best of my knowledge, correct and complete.	
 (Signature of Lobbyist)	12-30-02 (Date)

<b>PART V AUTHORIZATION TO LOBBY</b>			
NAME Merrill R. Jacobs	TITLE OF AUTHORIZING OFFICER OR PERSON REPRESENTED Regional Director		
NAME OF ORGANIZATION (if applicable) Pharmaceutical Research and Manufacturers of America	TELEPHONE 916-498-3304		
MAILING ADDRESS (Street) 980 9th Street, Suite 2200	(City) Sacramento	(State) CA	(Zip Code) 95814
I hereby authorize the above-named person to engage in lobbying activities on behalf of the undersigned.			
 (Signature of Authorizing Officer or Person Represented)		1-2-03 (Date)	